USAID | BURMA
FROM THE AMERICAN PEOPLE

1. **Issue Date:**	October 18, 2024
2. **Pre-Concept Note Information Session RSVP:**	October 30, 2024
3. **Pre-Concept Note Information Session:**	November 6, 2024
4. **Deadline for Questions:**	November 14, 2024
5. **Closing Date:**	December 17, 2024

Subject: Notice of Funding Opportunity (NOFO) Number: 72048225RFA00001
Title: BURMA: Resilient Tuberculosis Response in Myanmar (RTBR) Activity

Federal Assistance Listing Number: 98.001

Ladies/Gentlemen:

The United States Agency for International Development (USAID/Burma) is seeking applications for a cooperative agreement from qualified entities to implement in BURMA: Resilient Tuberculosis Response in Myanmar (RTBR) Activity. Eligibility for this award is restricted to local organizations (Please see the SECTION B below). Applicants may include international (including US-based organizations) as a subrecipient.

USAID intends to make an award to the applicant(s) who best meets the objectives of this funding opportunity based on the merit review criteria described in this NOFO, subject to a risk assessment and responsibility determination. Eligible parties interested in submitting an application are encouraged to read this NOFO thoroughly to understand the type of program sought, application submission requirements and selection process.

To be eligible for award, the applicant must provide all information as required in this NOFO and meet eligibility standards in Section B of this NOFO. This funding opportunity is posted on www.grants.gov and may be amended. It is the responsibility of the applicant to regularly check the website to ensure they have the latest information pertaining to this notice of funding opportunity and to ensure that the NOFO has been received from the internet in its entirety. USAID bears no responsibility for data errors resulting from transmission or conversion process. If you have difficulty registering on www.grants.gov or accessing the NOFO, please contact the Grants.gov Helpdesk at 1-800-518-4726 or via email at support@grants.gov for technical assistance.

USAID may not award to an applicant unless the applicant has complied with all applicable unique entity identifiers and System for Award Management (SAM) requirements detailed in

Section D.6.g. The registration process may take many weeks to complete. Therefore, applicants are encouraged to begin registration early in the process.

USAID will conduct a virtual Pre-Concept Note Information Session in local Burmese language for applicants and interested organizations on November 6, 2024. Applicants are encouraged to attend this information session so that they may fully understand the requirements of this NOFO. Applicants are requested to register their attendance by RSVP to Mr Aung Min Thaw at athaw@usaid.gov with copy to BurmaOAA@usaid.gov no later than October 30, 2024. While the eligibility for the award is restricted to local organizations, additional organizations may attend the virtual information session. The google link of the virtual information session will be shared with those registered by November 4, 2024.

Please send any questions to the point(s) of contact identified in Section A. The deadline for questions is shown above. Responses to questions received prior to the deadline will be furnished to all potential applicants through an amendment to this notice posted to www.grants.gov.

Issuance of this notice of funding opportunity does not constitute an award commitment on the part of the Government nor does it commit the Government to pay for any costs incurred in preparation or submission of comments/suggestions or an application. Applications are submitted at the risk of the applicant. All preparation and submission costs are at the applicant's expense.

Thank you for your interest in USAID programs.

Sincerely,

Bruce Gelband Digitally signed by Bruce Gelband Date: 2024.10.18 15:25:04 +06'30'

Bruce Gelband
Agreement Officer

This Burmese translation of the cover letter is provided as a courtesy. The English version of this NOFO will take precedence in case of any inconsistency in the Burmese translation and any disputes will be resolved by USAID.

အမေရိကန်ပြည်ထောင်စု နိုင်ငံတကာဖွံ့ဖြိုးရေးအေဂျင်စီ (**USAID/Burma)** သည် မြန်မာနိုင်ငံတွင် အကောင်အထည်ဖော်မည့် **Resilient Tuberculosis Response in Myanmar – RTBR** စီမံကိန်းအတွက် သင့်လျော်သောအဖွဲ့အစည်းများမှ **Cooperative Agreement** လက်တွဲဆောင်ရွက်မှု လျှောက်ထားချက်များကို ရှာဖွေလျှက်ရှိပါသည်။ ဤရန်ပုံငွေအစီအစဉ်အား ပြည်တွင်းအဖွဲ့အစည်းများသာ လျှောက်ထားရန် ကန့်သတ်ထားပါသည်။ သို့သော် လျှောက်ထားသူများသည် အပြည်ပြည်ဆိုင်ရာအဖွဲ့အစည်းများ (အမေရိကန်အခြေစိုက် အဖွဲ့အစည်းများအပါအဝင်) အား လက်တွဲလုပ်ဆောင်မည့် မိတ်ဖက်အဖွဲ့အစည်းများအဖြစ် ထည့်သွင်းလျှောက်ထားနိုင်ပါသည် (ကျေးဇူးပြု၍ အောက်တွင်ဖော်ပြထားသော **SECTION B** ကို ကြည့်ပါ)။

USAID/Burma သည် ဤရံပုံငွေ အခွင့်အလမ်း၏ ရည်မှန်းချက်များနှင့် အညီ အကဲဖြတ်သုံးသပ်မှု စံနှုန်းများအရ အသင့်တော်ဆုံး လျှောက်ထားသူ(များ)အား ရန်ပုံငွေပေးအပ်ရန် ရည်ရွယ်ပါသည်၊ **Risk Assessment and Responsibility Determination** ပြုလုပ်မည်ဖြစ်ပြီး လျှောက်လွှာ တင်သွင်းရန် စိတ်ပါဝင်စားပါက အသေးစိတ်အချက်အလက်များကို နားလည်သဘောပေါက်ရန် ဤရန်ပုံငွေအခွင့်အလမ်း (**NOFO**) ကို သေချာစွာ ဖတ်ရှုရန် အကြံပြုပါသည်။

ရံပုံငွေ လျှောက်ထားသူသည် ဤ **NOFO** တွင် ဖော်ပြထားသော အချက်အလက်များအားလုံးကို ဖြည့်စွက်လျှောက်ထားရမည်ဖြစ်ပြီး၊ ဤ **NOFO** ၏ **Section B** တွင် ဖော်ပြထားသော လိုအပ်ချက်စံနှုန်းများနှင့် ကိုက်ညီရမည်။

ဤ **NOFO** ကို **www.grants.gov** တွင် ဝင်ရောက်ဖတ်ရှုနိုင်ပြီး၊ အခါအားလျှော်စွာ ပြင်ဆင်ဖြည့်စွက်မှုရှိနိုင်သည်ကို သတိပြုစေလိုပါသည်။ ထို့ကြောင့်လျှောက်ထားသူများအနေဖြင့် ဤ

NOFO နှင့် စပ်လျဉ်းသည့် နောက်ဆုံးသတင်းအချက်အလက်များကို ရရှိနိုင်ရန် အဆိုပါဝဘ်ဆိုဒ်စာမျက်နှာကို စစ်ဆေးရန် လိုအပ်ပြီး **NOFO** အပြည့်အစုံကို ယင်းဝဘ်ဆိုဒ်စာမျက်နှာမှ ရယူထားသင့်ပါသည်။ **USAID/Burma** သည် လျှောက်လွှာတင်သွင်းခြင်း လုပ်ငန်းစဉ်ကြောင့် ဖြစ်ပေါ်လာသော အချက်အလက်အမှားအယွင်းများအတွက် တာဝန်မယူပါ။ **www.grants.gov** တွင် မှတ်ပုံတင်ရန် သို့မဟုတ် **NOFO** ကို ဖတ်ရှုရန် အခက်အခဲ ရှိပါက နည်းပညာဆိုင်ရာ အကူအညီရယူလိုပါက **Grants.gov Helpdesk (1-800-518-4726)** သို့ ဆက်သွယ်ရန် သို့မဟုတ် **support@grants.gov** သို့ အီးမေးလ်ပို့ရန် တိုက်တွန်းအကြံပြုလိုပါသည်။

ရံပုံငွေလျှောက်ထားသူသည် အပိုင်း **E.3** တွင် ဖော်ပြထားသည့် **Unique Entity Identifiers and System for Award Management (SAM)** လိုအပ်ချက်များအားလုံး ပြည့်စုံမှသာ **USAID/Burma** မှ ရန်ပုံငွေလျှောက်ထားမှုကို ထည့်သွင်းစဉ်းစားမည်ဖြစ်သည်။ **SAM** တွင် မှတ်ပုံတင်ခြင်းမှာ အချိန်ကာလတခုအထိ ကြာမြင့်နိုင်သည့်အတွက် မှတ်ပုံတင်ခြင်းအား စောလျှင်စွာ စတင်ရန် အကြံပြုပါသည်။

ရန်ပုံငွေလျှောက်ထားရန် စိတ်ပါဝင်စားသောအဖွဲ့အစည်းများအတွက် လိုအပ်ချက်များအား ကနဦးဆွေးနွေးမှု အစီအစဉ် ကို ၂၀၂၄၊ နိုဝင်ဘာလ ၆ ရက် တွင် မြန်မာဘာသာဖြင့် Google Meet မှတဆင့်ပြုလုပ်မည်ဖြစ်ပါသည်။ **NOFO** အသေးစိတ်အချက်အလက်များကို သေချာစွာသိရှိနားလည်စေရန် ဆွေးနွေးမည်ဖြစ်သောကြောင့် စိတ်ဝင်စားသူများအနေဖြင့် တက်ရောက်ရန် တိုက်တွန်းလိုပါသည်။ တက်ရောက်ရန်စိတ်ဝင်စားသူများအနေဖြင့် ဦးအောင်မင်းသော်၏ အီးမေးလ်လိပ်စာ **athaw@usaid.gov** သို့လိပ်မူ၍ မိတ္တူကို **BurmaOAA@usaid.gov** သို့ ၂၀၂၄၊ အောက်တိုဘာ ၃၀ ရက် နောက်ဆုံးထား နာမည်စာရင်း ပေးသွင်းရမည်ဖြစ်ပါသည်။

USAID/Burma မှ ၂၀၂၄၊ နိုဝင်ဘာ ၄ ရက် တွင် **Google Meet meeting link** အားပေးပို့သွားမည်ဖြစ်သည်။

NOFO အတွက်မေးခွန်များရှိပါက **Section A** တွင်ဖော်ပြထားသော ဆက်သွယ်ရမည့်သူထံသို့ မေးမြန်းနိုင်ပါသည်။ မေခွန်းများပေးပို့ရန်နောက်ဆုံးရက်အား အထက်တွင်ဖော်ပြထားပြီး အဆိုပါရက်မတိုင်မီ ရရှိခဲ့သည့် မေးခွန်းများ၏ ဖြေကြားမှုများကို **NOFO** ပြင်ဆင်ချက်ဖြင့် ဖြည့်စွက်ဖြေကြားပေးသွားပါမည်။

ဤ **NOFO** ထုတ်ပြန်ခြင်းသည် အမေရိကန်အစိုးရဘက်မှ ကတိကဝတ်ပြုခြင်း မဟုတ်ပါ။ လျှောက်လွှာတင်သွင်းခြင်း သို့မဟုတ် လျှောက်ထားမှု ကုန်ကျစရိတ်များအတွက် အမေရိကန်အစိုးရမှ ပေးဆောင်ရန် ကတိပြုခြင်းလည်း မဟုတ်ပါ။ လျှောက်လွှာပြင်ဆင် တင်သွင်းခြင်းအတွက် ကုန်ကြစာရိတ်များသည် လျှောက်ထားသူ၏တာဝန်သာဖြစ်သည်။

USAID/Burma ၏စီမံကိန်းများအား စိတ်ပါဝင်စားမှုအတွက် ကျေးဇူးတင်ရှိပါသည်။

လေးစားစွာဖြင့်

Bruce Gelband

Agreement Officer

NOFO TABLE OF CONTENTS

SECTION A: BASIC INFORMATION

1. Executive Summary

This activity will strengthen the ability of non-National TB Program (NTP)/ Public providers, such as GPs, private hospitals and clinics, and NGO-managed clinics to screen, test, and treat TB and DR-TB patients and provide TB preventive therapy to close contacts of TB patients. This activity also seeks to improve the providers' knowledge of TB and DR-TB, enhance their abilities to provide TB-related services to their clients and to expand the number of partners and organizations involved in TB care delivery. The Activity will engage large private hospitals in the TB testing and treatment consortium, facilitate the introduction of novel strategic health purchasing schemes, and train health providers to apply internationally-accepted TB testing and treatment algorithms and protocols. In addition, the activity will have significant emphasis on improving TB diagnosis in Myanmar, with the introduction of new technologies, electronic laboratory management systems, and quality control. To support the Monitoring and Evaluation (M&E), the activity will strengthen TB data recording and reporting among engaged healthcare providers, including private GPs and hospitals, assist utilization of M&E frameworks, databases, data analysis and reporting. This activity will expand the network of TB service providers, improve people's access to TB diagnosis and treatment, and improve data surveillance.

2. Estimate of Funds Available and Number of Awards Contemplated

USAID intends to award a one Cooperative Agreement pursuant to this notice of funding opportunity. Subject to funding availability and at the discretion of the Agency, USAID intends to provide an amount not to exceed $13,500,000 in total USAID funding over a five-year period.

3. Start Date and Period of Performance for Federal Awards

The anticipated period of performance is five-year as of the effective date of the award. The estimated start date will be the third quarter of the USG Fiscal Year (FY) 2025.

4. Agency Point of Contact

Name: Aung Min Thaw
Title: Acquisition and Assistance Specialist
Email: athaw@usaid.gov

5. Acquisition and Assistance Ombudsman

The A&A Ombudsman helps ensure equitable treatment of all parties who participate in USAID's acquisition and assistance process. The A&A Ombudsman serves as a resource for all organizations who are doing or wish to do business with USAID. Please visit this page for additional information: https://www.usaid.gov/work-usaid/acquisition-assistance-ombudsman.

The A&A Ombudsman may be contacted via: Ombudsman@usaid.gov

6. Authorized Geographic Code

The geographic code for the procurement of commodities and services under this program is **937**, which is defined as the United States, the recipient country, and developing countries other than advanced developing countries, but excluding any country that is a prohibited source.

[END OF SECTION A]

SECTION B: ELIGIBILITY

1. Eligible Applicants

The eligibility requirement is restricted to local organizations.

Organizations eligible to submit a Concept Paper in response to this NOFO are local organizations.

Only local organizations as defined below are eligible for the award. USAID defines a "local entity" as an individual, a corporation, a nonprofit organization, or another body of persons that:
(1) Is legally organized under the laws of;
(2) Has as its principal place of business or operations in; and
(3) Is majority owned by individuals who are citizens or lawful permanent residents of; and
(4) Is managed by a governing body the majority of who are citizens or lawful permanent residents of the country receiving assistance.

For purposes of this section, 'majority owned' and 'managed by' include, without limitation, beneficiary interests and the power, either directly or indirectly, whether exercised or exercisable, to control the election, appointment, or tenure of the organization's managers or a majority of the organization's governing body by any means.

Recipients must be responsible entities and must have the necessary organizational experience, accounting, operational controls and technical skills, or ability to obtain them in order to achieve the objectives of the activity and comply with the terms and conditions of the Award. Concept papers from organizations that do not meet the above eligibility criteria will not be reviewed and evaluated.

USAID strongly encourages concept papers from potential new partners to the US government who meet the above eligibility requirements. Such organizations are advised that they will be required to undergo a Pre-Award Responsibility Determination - a pre-award survey to determine fiscal responsibility (i.e. whether the prospective recipient has the necessary organization, experience, accounting and operational controls, and technical skills – or ability to obtain them – in order to achieve the objectives of the project and comply with the terms and conditions of the award).

While for-profit firms may participate, pursuant to 2 CFR 200.400(g) it is USAID policy not to award profit to recipients and subrecipients under assistance instruments. However, while profit is not allowed for sub-awards, the prohibition does not apply when the recipient acquires goods and services in accordance with 2 CFR 200.317 -326, "Procurement

Standards." This is discussed more specifically in ADS 303sai "Profit Under USAID Assistance Instruments" which can be found at this link:

2. Cost Sharing

Cost Sharing is not required for this activity.

[END OF SECTION B]

SECTION C: PROGRAM DESCRIPTION

This funding opportunity is authorized under the Foreign Assistance Act (FAA) of 1961, as amended. The resulting award will be subject to 2 CFR 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, and USAID's supplement, 2 CFR 700, as well as the additional requirements found in Section H.

I. PROBLEM STATEMENT

Myanmar's high burden of TB, TB-HIV, and MDR-TB is a significant public health challenge that the country has been grappling with for decades. Despite some progress made in reducing TB incidence over the last decade, the number of total TB cases notified decreased by 50 percent in 2021 compared to 2019, after the COVID pandemic in 2020 and political upheaval in 2021. Further deterioration of the public healthcare system in the country resulted in significant decline in TB parameters in 2023 and estimated to be further declined in 2024.

Limited capacity and ability by the players outside of the National Tuberculosis Program (NTP), such as private general practitioners (GPs), private hospitals, pharmacies, and clinics managed by NGOs to sustain and scale up TB interventions, such as TB screening, testing, treatment delivery and implementation of TB preventive measures. While non-NTP players contribute up to 30% of annually detected TB cases, it is estimated that it could be as much as 50-60%, based on the data published by the Word Bank.

II. PURPOSE

The purpose of this activity is to strengthen the ability of non-NTP providers, such as GPs, private hospitals and clinics and NGO-managed clinics to screen, test, treat TB and DR-TB patients and provide TB preventive therapy to close contact of TB patients.

A. Background

Tuberculosis (TB) is one of the world's leading infectious disease killers. Despite being preventable, treatable, and curable, this ancient disease continues to kill more people each year than HIV and malaria combined. In cooperation with local partners, USAID provides bilateral assistance to 24 countries globally with high burden of TB, including Myanmar, which has one of the highest levels of tuberculosis in the world. Myanmar is among countries with triple TB epidemic: drug-sensitive tuberculosis (DS-TB), multidrug-resistant TB (MDR-TB), and coinfection

of TB and Human Immunodeficiency Virus (TB/HIV). According to the Institute for Health Metrics and Evaluation data, TB remains among Myanmar's top ten causes of morbidity and mortality.

The WHO's 2022 TB incidence estimation for Myanmar is 475 per 100,000, a 30 percent increase compared to 2021, due to significant drop in TB case detection by the National TB Program (NTP) in 2020-2021. WHO estimates that 257,000 new TB cases emerged in the country in 2022, a 32 percent increase from the 2021 estimate of 194,000. The estimated incidence of lab-confirmed pulmonary TB in Yangon is 506/100,000, significantly higher than the national average. Based on preliminary data from 2023, 128,000 drug-sensitive TB (DS-TB) cases were detected in Myanmar among 257,000 estimated, demonstrating a significant gap of 50%. Also, 2,664 Drug Resistant (DR-TB) cases were detected, among 13,000 estimated. USAID/Burma implementing the Global TB Accelerator program and aiming to achieve national TB targets set during the 2023 UN High-Level meeting for TB.

USAID has provided bilateral support to address TB in Myanmar since 2013 and invested over $90 million. USAID/Burma provides training, technical assistance and capacity building to local and international organizations to address TB detection, treatment and prevention among vulnerable and high-risk groups. Through Resilient Tuberculosis Response in Myanmar (RTBR) Activity, USAID intends to expand the technical assistance and support to private, non-governmental players in the country in order to expand access to and delivery of TB services.

B. Private Sector Engagement

In Myanmar, private sector providers, ranging from general practitioners to large and small private hospitals and pharmacies play an important role in delivering healthcare to the population. Publications show that private providers are the destination for 75% (67%–84%) of initial care-seeking, and private expenditure represents 61%–74% of total expenditure on health in Asia countries, including Myanmar. Approximately 30% of all TB notifications are reported by the non-governmental sector, such as private GPs, hospitals, clinics as well as healthcare facilities managed by the non-governmental organizations (NGOs).

National TB Prevalence Survey (2018) proved that health seeking behaviors of TB suspects started with private health care providers including general practitioners and pharmacies, without formal quality assurance of care and reporting systems with NTP. No TB cases reported from private pharmacies at the national level and not affiliated with NTP, although some NGOs have been working with private pharmacies for active case finding, and there is no data on disbursing the TB medications in the pharmacies.

While WHO's Joint Monitoring Mission (2019) recommended the scale up of collaborative and cooperative efforts between public and private sectors of TB care, among 253 private hospitals and 6,590 GP clinics, a very limited number of private care providers (11% of hospitals and 45% of GPs) had been working for TB through some NGOs. NTP committed to "strengthen PPM

activities first, by engaging drug sellers and pharmacies to encourage patients with a long-standing cough to visit TB facilities…a system can be set up whereby drug sellers and pharmacies will refer".

C. USAID/Burma TB program

USAID/Burma's health programming is closely aligned with the goals of the National Strategic Plan (NSP) 2021-2025 for Tuberculosis in Myanmar, the TB Action Plan as well as the global End TB Strategy. The National Strategic Plan 2021-2025 for Tuberculosis aims to reduce TB incidence by 50% by 2025, and end the TB epidemic in Burma by 2035. USAID/Burma aims to institutionalize improvements in policy development, data use, financial risk protection, supply chain management, and human resource development of health providers to improve delivery of TB detection, prevention, and treatment services. USAID support to local NGOs which have on-site clinics demonstrated the value of support and positive outcomes in the number of clients served. Partnering with a network of private GPs demonstrated significant output in the number of people screened for TB disease and enrolled on first-line treatment for DS-TB.

USAID RTBR activity will assist non-NTP clinics to be able to routinely screen and test patients for TB symptoms, utilize novel diagnostic equipment for disease confirmation and provide high-quality TB care services for both sensitive and drug-resistant TB. Activity will assist with engaging large private hospitals in the TB testing and treatment consortium, facilitate the introduction of novel strategic health purchasing schemes and train health providers to apply internationally-accepted TB testing and treatment algorithms and protocols

USAID/Burma's TB program covers the States and Regions of Yangon (catchment area including Bago and Ayeyarwaddy), Mandalay, Sagaing (Magway), Kachin state, Shan state, and Tanintharyi. with national level support for Procurement and Supply Chain Management and technical assistance to the National Tuberculosis Program (NTP). See Table 2 found in the link below for a full breakdown of USAID's TB programming in Myanmar

Also find the report from USAID funded Local Action Towards TB Free Myanmar Activity

D. USAID/Burma's key TB priorities

USAID/Burma will build upon recent program adjustments (including engaging more with the non-governmental sector) to maximize TB prevention, diagnostic, and treatment services amidst staffing shortages and other crises that are expected to continue in the current political situation. The program will prioritize finding missing cases to catch up to the case notification targets set forth by the UN General Assembly (UNGA) and in the Burma National Strategic Plan for TB, and will work to ensure that all notified cases receive treatment services. USAID/Burma will work to link community-based case finding activities with contact investigation and

promotion of tuberculosis preventive treatment (TPT), and will tailor interventions to the needs and preferences of clients, with a special focus on understanding how to make services more male-friendly, as there are a higher number of males affected by TB in Burma. The Mission will bolster TB services in high-burden areas, by involving the private sector and strengthening NGO-supported service delivery. USAID RTBR activity will play an important role in helping to achieve 2024 TB Roadmap priorities as well as the USAID TB Strategy for 2023-2027.

E. Donor Support and Other Partners

USAID is working closely with the WHO, and the Global Fund principal recipients (PRs) and the Access to Health Fund to advance the TB and HIV response. Global Fund and Access to Health also work with local organizations such as the Myanmar Medical Association and the Myanmar Anti Tuberculosis Association to implement community-based TB care (CBTBC) activities led by trained community volunteers.

F. Coordination with other Health Activities and Development Partners

USAID RTBR will work with all relevant USAID health projects and other development partners implementing TB activities in Burma. USAID RTBR will assist with engaging large private hospitals in the TB testing and treatment consortium, facilitate the introduction of novel strategic health purchasing schemes and train health providers to apply internationally-accepted TB testing and treatment algorithms and protocols. Activity will closely cooperate and coordinate with other USAID-funded partners, such as HIV TB Agency, Information and Services Activity and Local Engagement and Development for TB activity. USAID RTBR will have significant emphasis on improving TB diagnosis in Myanmar, with the introduction of new technologies, electronic laboratory management systems and quality assurances and partner with the Access to Health as well as the WHO Burma office.

G. Expected Geographic coverage in Burma

RTBR is expected to cover the following geographic regions: Yangon, Ayeyarwady, Bago, Mandalay, Sagaing (Magway), Kachin state, Shan state and Tanintharyi.

III. OBJECTIVES

Through this NOFO, USAID seeks Concept Papers (CPs) to achieve the following objectives:

Objective 1. Strengthen the network of private general practitioners for TB detection and care

Nongovernmental health service delivery has a long history of implementation in Myanmar. Since 2004, through the support of PSI, the social franchise network of Sun Quality Health Clinics

(SQH Network) has been formed among private general practitioners who independently operate small and mid-size clinics for neighboring communities. The initial focus of the network was on family planning, but then expanded to other health services including tuberculosis. Approximately 1,500 general practitioners belong to the SunHealth network, with approximately 800 engaged in TB screening, referral and treatment for DS-TB. Through the support of Population Service International (PSI), network providers receive training and educational sessions on specific health topics, mentoring, basic supplies of commodities and guidance on reporting and recording. GPs engaged in TB work, participate in three "schemes" of services: from initial scheme 1, when providers only screen people for TB and refer them for testing and treatment to the governmental clinics, to scheme 3, when GPs provide full testing and treatment care.

Through the implementation of Objective 1, USAID is seeking to support an implementing partner (IP) to expand the size of the current TB network of Sun clinics, add more general practitioners to the network. Assist current network members in scheme 1 to increase their capacity and expand service provision to reach scheme 2 and respectively providers in scheme 2 to engage in TB treatment delivery under scheme 3. The implementing partner will improve access to digital chest X-ray and molecular diagnostic TB tests for Sun Health clients through the expansion of diagnostic sites, facilities and through procurement of equipment and commodities. Lastly, the implementing partner will assist GPs in scheme 3 to expand service delivery for patients with drug-resistant tuberculosis, through short, all-oral regimens. The IP will also train the clinic assistants to support the GP doctors for timely and consistent recording and reporting, and provide training on how to manage patients while on treatment. Also, digital adherence tools would be introduced and scaled up through implementation of this Objective.

Objective 2. Establish network of private and nongovernmental hospitals for TB service delivery

Myanmar healthcare system has a large network of private hospitals, providing services to people from basic health conditions to specialized care, including surgery and rehabilitation. There are nearly 300 private hospitals in the whole country and more than 200 hospitals are members of Myanmar Private Hospital Association (MPHA). It is estimated that major private hospitals receive as much as 50,000 outpatient department (OPD) visits per day, and with a TB rate as high as 475 per 100,000, as many as 230 TB patients could be diagnosed per day. However, the Myanmar NTP does not have enough capacity to engage and work closely with the private hospitals and support from USAID implementing partners is required. The proper assessment is needed to understand the screening, diagnostic and treatment practices at the large private hospitals for TB. While chest X-ray is likely available at the facilities, access to novel molecular diagnostic tools is probably lacking. Also, the level of bacteriological testing among clients accessing private hospitals is low. Treatment regimens might not be in line with international standards and care for patients with DR-TB might be absent.

Through implementation of Objective 2, USAID is seeking to support the establishment of a practical screening and testing network of private and non-governmental hospitals in order to

improve screening for TB among OPD visitors, achieve universal access to chest X-ray and significantly improve access to bacteriological testing through novel molecular tools. An implementing partner will provide training and capacity building to healthcare staff to improve their knowledge on both TB detection and treatment. Staff will be trained on provision of standard TB treatment protocols for adults and children, with both DS- and DR-TB, improve quality of care delivery, introduce digital adherence practices and provide psychological counseling and support. Moreover, the IP will also advocate and coordinate between the National TB Program and the private hospital network and support the private hospitals to mandatorily notify their TB cases to the NTP surveillance system. Lastly, the implementing partner will introduce a system of strategic health purchasing in order to establish a sustained service delivery platform and reduce catastrophic cost to patients and their families.

Objective 3. Strengthen the network of pharmacies for TB detection

In many Asian countries, including Myanmar, pharmacies play a crucial role in providing initial healthcare services to the public. The process of seeking initial healthcare through pharmacies in these countries often involves several key elements like accessibility, availability of the over-the-counter medicines, consultation with pharmacists, etc. Pharmacies are often widely distributed and easily accessible in urban and rural areas. They are commonly found in neighborhoods, markets, shopping centers, and even nearby and within hospitals. People seeking initial healthcare often visit pharmacies to purchase over-the-counter medications for common ailments such as headaches, cough, colds, fever, and digestive issues. Pharmacists may offer advice on suitable medication and products based on the symptoms described by the customer. In many Asian countries, including Myanmar, a limited number of pharmacists are trained to provide basic healthcare consultations while most of the small-scale drug shopkeepers are not properly trained. However, when people with cough or other TB-related symptoms seek medical attention in pharmacies, usually no information is provided about how people can be tested or screened for TB and where to get TB treatment, resulting in a missed opportunity. While in the past, donor-funded activities introduced a self-screening application via the phones, which helps to run the TB-related questionnaire, such activities are implemented at a limited scale.

Through this Objective, USAID is seeking to support the expansion of the existing network of pharmacies in Yangon region and create a similar type of network in other states and regions, where the activity will be operational (see Geographical focus area Section). The IP will also recruit the workforce like coordinators and support the clients referred from the pharmacies to reach to the diagnostic facilities and have a right diagnosis and treatment from the clinics and hospitals and completely finish the treatment. They will also train and make sure the pharmacies record and report the data by monitoring and supervision. The implementing partner will provide training and educational sessions to pharmacists and pharmacy operators/managers, establish a digital online system for patients to self-screen for symptoms and pilot an innovative method of non-sputum testing via PCR technology. In particular, the partner will establish a hub-and-spoke model for pharmacies to be connected to the molecular diagnostic center, where portable PCR instruments will be located. Patients would be able to self-swab and deposit the

stick at the pharmacy designated location. Later it will be sent to the PCR testing center for processing and both the patients and healthcare provider would be notified of the test results.

Objective 4. Strengthen TB data recording and reporting

Collecting and reporting essential programmatic data is a necessary element of public health operations. However, in the private sector, especially in the GP network and private hospitals, recording and reporting of TB data has not been well established. In most cases, patient's records are recorded in the internal M&E system, and only limited data parameters are collected, which are needed to manage the TB condition. However, a significant number of parameters, which are usually recorded in the NTP database and then submitted to the WHO global TB database is not routinely collected by the private providers. Incomplete data collection and absence of reporting to the state/regional and national TB database makes it difficult for local and international partners and donors to fully assess the TB epidemiology in the country and make data driven decisions.

Under this Objective, the implementing partner will assist activity clients, such as network of general practitioners, private and non-governmental hospitals and pharmacies to develop modern, digital and user-friendly TB data collection tools and systems, which could be operational on mobile devices as well as stationed computers. Implementing partner will roll out the new data collection tools, establish linkages with the state and provincial NTP M&E systems and facilitate reporting of internationally-accepted parameters. In addition, the partner will introduce data quality assurance mechanisms and data validation processes. As a result, all activity clients would be able to record and report TB data parameters, in accordance with the WHO, Global Fund and USAID requirements, and meet the NTP standards.

The state and regional TB program utilizes the District Health Information System 2 (DHIS2) as the principal tool for eHealth architecture for aggregate reporting. After the military coup, the public sector strike and widespread internet connection outages are negatively impacting the quality of reporting. Due to limited human resources in the public sector, NTP has limited ability to collect, process and record essential TB data coming from both public and non-governmental facilities, including the private sector. It is expected that the implementing partner will be able to assist governmental M&E offices at selected states and regions to improve the monitoring system, assist with data entry and validation and support the quarterly data collection, analysis and reporting.

Objective 5. Support local entities for sustainable and resilient operations

In the last few years USAID made significant attention to direct partnership with local organizations and shifting decision-making power to the people, organizations, and institutions that are driving change in their own countries and communities. Experience shows that local leadership over development and humanitarian goals and programming is important for equity, effectiveness, and sustainability. Through the localization approach, USAID strives to advance locally led development and public health response, in which local actors set their own agendas,

develop solutions, and mobilize the capacity, leadership, and resources to make those solutions a reality.

However, time and efforts are required to build, support and sustain local partners for public health response in Myanmar. Through this Objective, USAID is aiming to provide direct support to local partners, implementing this activity, to improve capacity for operations and management, gain new skills and information and improve quality of day-to-day operations. It is expected that local private entities like private hospitals, GP clinics, laboratories and pharmacies from participating states and regions would be able to join the implementation of this activity and will receive capacities and skill sets in organizational development, financial management and accountable recording and reporting to implement TB activities and contribute to the goals and objectives of this activity. Capacity building will be provided to continue, sustain and expand operations in selected geography.

IV. GUIDING PRINCIPLES

The applicant should consider the following when developing the interventions:

1. Diversity, Equity, and Inclusion (DEI): USAID's TB program will work to promote, enhance, and sustain diversity and inclusion in all activities. To meet our goal of equity, USAID will prioritize working with underserved communities and those who are in the greatest need.
2. Local Ownership and Leadership: USAID will partner with local governments and organizations and support their implementation of TB activities. USAID will actively engage with country leadership to promote program ownership through increased local investments and program monitoring. USAID will continue to support high-level advocacy to actively engage local leaders and communities in eliminating TB at the national level.
3. Person-Centered Approach: USAID will continue to place individuals and communities affected by TB at the core of each activity. USAID will support countries in building a holistic, individualized, respectful and empowering health service delivery system for TB that includes TB-affected individuals in decision making regarding the development, implementation, and evaluation of care and treatment services. USAID will support national TB programs in adopting flexible and tailored approaches that minimize health system barriers and costs to individuals, and to meet the needs and preferences of people affected by TB to improve each person's health outcomes.
4. Effective and Efficient Programming: USAID will strive to use funds effectively and efficiently to achieve value for money. The Agency will remain flexible and responsive to adapt to existing and new TB-related challenges and situations in partner countries.
5. Strategic Partnership: USAID will continue to work with key international and domestic partners, including the Global Fund to achieve global goals.

6. Evidence Driven Programming: USAID will support the availability of high-quality, updated, and rigorous systems for TB care across partner countries. USAID will also evaluate systems to generate evidence that will help to improve strategic planning, project design, and resource decisions.

V. ANTICIPATED RESULTS

The activity will contribute to national efforts to end the TB epidemic in Myanmar. Applicants are expected to propose activities that are appropriate and relevant to the situation and needs of people affected by tuberculosis.

Specifically, at the end of the activity, RTBR activity will have contributed to the following:

- Increased TB case finding and notifications among non-NTP players nationwide;
- Improved service delivery for engaged private providers;
- Scaled up and expansion of novel diagnostic tools, such as digital chest X-ray and molecular testing;
- Established and sustained of network of nongovernmental hospitals;
- Established, sustained and expanded network of pharmacies in targeted cities, states and regions;
- Strengthened and improved quality of TB referrals and case finding among pharmacy network members;
- Improved capacity of private providers and nongovernmental organizations to record and report TB data;
- Established and sustained quality assurance mechanism for data processing, recording and reporting;
- Increased number of local organizations engaged in TB response in targeted selected states and regions; and
- Improved capacity of local organizations for continued and resilient operations.

VI. EXPECTED PERFORMANCE INDICATORS, TARGETS, BASELINE DATA AND DATA COLLECTION

The AMEL plan will specify indicators and should incorporate "core" and "core plus" TB indicators based on USAID's TB Performance-Based Monitoring and Evaluation Framework (PBMEF) for TB Programs (Guide for Indicators) as appropriate for this activity. The PBMEF indicators are aligned with the leading global strategic documents, including the U.S. Government's USAID Global TB Strategy 2023-2030, the WHO End TB Strategy, and UNGA HLM Political Declaration on TB. The AMEL plan should be aligned and reflect the elements of the USAID Global TB Strategy M&E logical framework. Other national, sub-national, and extended PBMEF indicators from the comprehensive list presented in the USAID PBMEF guide may also be

considered to help track progress toward achieving set targets. The monitoring section should also envision a clear and concise Data Quality Assurance (DQA) plan to verify the quality and reliability of data collected for every indicator. When proposing interventions, the following indicators should be considered:

- Number of people screened for TB
- Number of people with presumptive TB identified
- Number of people with presumptive TB who were tested with a rapid diagnostic test
- Number of people notified with new and relapse TB
- Percent Bacteriologically Confirmed
- Rapid diagnostic testing at the time of initial diagnosis (percentage)
- Number of DS-TB treatment initiations
- Number of DS-TB people who were successfully cured or treatment completed
- Percent of people with new and relapse TB with drug susceptibility testing (DST)
- Number of people with RR/MDR-TB notified
- Number of pre-XDR/XDR notified
- Number of people with DR-TB initiated treatment
- Number of people with DR-TB disease who successfully treated
- Percent of people with notified TB with a contact investigation initiated
- Percent of Contacts Screened for TB disease
- TPT Initiations (core), including TPT initiations among contacts
- TPT Completions rate/number

VII. SUBSTANTIAL INVOLVEMENT

A successful applicant under this funding opportunity should anticipate a cooperative agreement award involving substantial involvement. In accordance with ADS 303.3.11, USAID/Burma will be substantially involved during the implementation of this Cooperative Agreement, through the Agreement Officer's Representative (AOR)'s approval of the following:

- Approval of recipient's Annual Implementation Plans.
- Approval of the specified Key Personnel.
- Agency and Recipient Collaboration or Joint Participation: Collaborative involvement in selection of advisory committee members, if the program will establish an advisory committee that provides advice to the recipient. USAID may participate as a member of this committee as well. Advisory committees must only deal with programmatic or technical issues and not routine administrative matters.
- Concurrence on the substantive provisions of sub-awards.
- Approval of Activity Monitoring, Evaluation and Learning (MEL) Plans.
- Agency monitoring to permit specific kinds of direction or redirection because of the inter-relationships with other projects.
- Approval of Gender Action Plan.

[END OF SECTION C]

SECTION D: APPLICATION CONTENT AND FORMAT

1. General Content and Form of Application

USAID/Burma will utilize the following application selection process.

Phase 1: Concept Application

Each applicant must furnish the information required by this NOFO. The Concept Application should be submitted per the below instructions and describe technical aspects of the applicant's proposed program.

Each applicant must also submit a summary budget with the Concept Application indicating the requested USAID funding amount. See Section D.E below.

Phase 2: Co-Creation and Full technical and cost application submission

USAID will inform the Apparently Successful Applicant(s) that they have been selected to proceed to the next stage of the process, co-creation.

The co-creation phase is a collaborative approach whereby USAID and the selected Applicant(s) will jointly develop the Program Description of the Activity. Instructions will be provided on how the co-development process will be conducted, either in person in Yangon, Myanmar or virtually.

The applicant's proposed Chief of Party from the concept application phase should participate in and support the co-creation phase, if available.

After completion of the co-creation phase, a Request for a Full Application (RFA) will be issued to the Apparently Successful Applicant(s). The Apparently Successful Applicant(s) will then be required to submit the full technical application using the co-created Program Description and a full cost application (solely developed by the Apparently Successful Applicant) along with any other required documents to be submitted as instructed. During co-creation/ co-development or after receipt of the full application, USAID reserves the right to select another applicant from the pool of applicants in the event a final agreement is not reached with the initially selected Apparently Successful Applicant(s).

The following requirements apply to documents submitted for Phase 1:

- Letter size paper.
- Written in English.
- 12-point Calibri font with one inch margins.

- Graphics/charts/tables may use 10-point Calibri font, so long as it is legible without magnification. Graphs, charts, and tables should be for illustrative purposes only and should not comprise the majority of the application text.
- Submitted via Microsoft Word or PDF compatible formats.
- All pages after the cover page must be consecutively numbered.

The applicant should retain a copy of the application and all enclosure for their records.

2. Phase I- Concept Application

Timeline:

1. **Pre-Concept Note Information Session:** All interested organizations are requested to acknowledge their attendance by RSVP no later than the date and time indicated on the cover page. The link of the virtual information session will be shared prior to the session with those who RSVP. The email subject line should be "BURMA: Resilient Tuberculosis Response in Myanmar (RTBR) Information Session".
2. **Questions:** Any question related to the NOFO must be submitted by the date and time indicated on the cover page. The email subject should be "BURMA: Resilient Tuberculosis Response in Myanmar (RTBR) NOFO Questions".
3. **Concept Note Submission:** The concept note in response to the NOFO must be submitted by the date indicated on the cover page. The email subject line should be "BURMA: Resilient Tuberculosis Response in Myanmar (RTBR) Concept Note Submission"

The Applicant must submit a concept application not to exceed ten pages (including the cover page, the Summary Budget Information). The Concept Application should be written from a strategic viewpoint that reflects an understanding of the opportunities and challenges that exist and reflect a convincing approach to achieve the Activity outcomes and results set forth above. Concept submissions must be in standard 8 ½" x 11", single sided, single-spaced, 12-point Calibri font, 1" margins, left justification and headers and/or footers on each page reflecting consecutive page numbers, date of submission, and Applicant's name. Submissions must be via Microsoft Word or PDF formats, except budget files which must be submitted in Microsoft Excel with formulas and cells unlocked.

Any pages submitted beyond the limit will not be evaluated. Additional documentation, such as annexes, charts and graphs that exceed the ten pages will not be reviewed. USAID will not review any information provided in links in the Concept Application. The Concept Application may be in English language. The applicant must also submit a Summary Budget (not counted towards page limit) as a separate document in the format described below and must be submitted in English language only.

Order	Required Item	Page Limit	Instructions
Concept Application: Technical Part			
1	Cover Page	1	See Section D.A
2	Proposed Technical Approach	5	See Section D.B
3	Institutional Experience and Past Success	2	See Section D.C
4	Management Plan	2 (excluding COP annex)	See Section D.D
Additional Information:			
1	Summary Budget Information	1	See Section D.E

The concept application should be specific, complete, and presented concisely. The application must demonstrate the applicant's capabilities and expertise with respect to achieving the goals of this activity. The application should take into account the requirements of the program description.

The concept application must be structured as follow:

A. Cover Page

The cover page must be include the following:

- Name of the organization
- Organization submitting the application;
- Signature of authorized representative of the applicant;
- Identification of the primary contact person (by name, title, organization, mailing address, telephone number and email address) and the identification of the alternate contact person (by name, title, organization, mailing address, telephone number and email address);
- Activity/Program title;

- UEI number for primary applicant if available;
- Notice of Funding Opportunity number; and
- Name of any proposed subrecipients or partnerships (identify if any of the organizations are local organizations, per USAID's definition of 'local entity' under ADS 303.3.6.5(c)(1).

B. Proposed Technical Approach

The proposed technical approach should: (1) demonstrate a thorough understanding of and appreciation for the implementation challenges of the current country context and policy environment in Myanmar in the selected geographic areas and clearly describe how the proposed approaches/interventions will achieve the objectives and results of this funding opportunity within the timeframe anticipated; (2) describe how the approach prioritizes the Guiding Principles, including gender considerations[1].

C. Institutional Experience and Past Success

The Applicant must demonstrate the institutional capacity to successfully implement this activity successfully. Applicants must describe their relevant previous experiences from the past five years, working on health sector interventions of similar complexity. Applicants (and major subrecipients***, if any) must clearly describe their respective roles in each experience described and what was actually accomplished as a direct result of the applicant's or major subrecipient's direct efforts.

*** For the purpose of this section, the term "major subrecipient" includes only those subrecipient(s) budgeted in excess of $3,000,000 in the summary budget over the entirety of the performance period.

D. Management Plan

The Applicant must propose a convincing management and staffing plan, including Key Personnel to successfully implement this activity. The applicant need only propose a specific individual for the Chief of Party position. No other individuals need be identified by name in

[1] Participation of all stakeholders, including women and men's groups and networks in the development of strategies to eliminate TB. Similar to other parts of the world, men in Burma have higher rates of TB than women; and are commonly thought to be more at risk for TB due to both physical and behavioral reasons. Men on average delay seeking care more than women and have lower treatment success rates. Women are at high-risk of TB in locations where access to health care is limited.

the application. The plan should describe a clear and feasible management approach that will ensure results-oriented implementation in the selected geographic areas. If applicable, describe and define the role of any other organizations that will partner with the prime applicant including major subrecipients and other subrecipients with a substantial role in implementation and may include US or third-country subrecipients. This must include a description of how roles will be divided amongst these implementing organizations, how these relationships will be managed across states/regions and technical areas to ensure cohesive implementation and how a prompt and timely initiation of activities will be ensured. Lastly, the applicant must describe how monitoring of activities and reporting on financial expenditure, program performance, and legal and policy compliance will be effectively managed.

Key Personnel

The Key Personnel required for the performance of this award include the Chief of Party (COP) and up to four additional Key Personnel to be proposed by the applicant as follow:

Name	**Position**
1.	Chief of Party
2.	TBD
3.	TBD
4.	TBD

Key Personnel specified above are considered to be essential to the work being performed hereunder. The applicant shall propose their own labor mix to fit their technical approach. The Key Personnel are responsible for management, facilitation, and ensuring that activities and tasks are carried out within reasonable requested timeframes and meet quality standards.

The application must present a resume in an annex (not counting toward page limit) that details the experience, education, and qualifications of the proposed Chief of Party. The resume must include a minimum of five references with current email and telephone number contact information. It should be noted that USAID reserves the right to solicit references beyond those submitted. The resume may not exceed five pages and must, at a minimum, identify the start year and month and end year and month for each former/current employment listed. Also, a signed letter of commitment must be submitted for the Chief of Party proposed, indicating (a) his/her intention to serve for a stated term of the service [state the period in the letter], and (b) agreement to the compensation level

which corresponds to the levels set forth in the summary budget.

Chief of Party

Responsible for overall and day-to-day management of award activities, involving multiple tasks across multiple locations. Demonstrates high-level strategic vision for advancing desired outcomes outlined in the PD, excellent management skills and leadership of complex projects. Provides effective technical and project management guidance and coordination to the overall project team and is responsible for the quality of all work products. Organizes, directs and coordinates the planning and production of all award support activities, effectively leveraging partners' expertise. Responsible for staffing, project planning, project financials, and staff direction and oversight. Maintains and manages the relationship with USAID and will require full-time attention, 100 percent level of effort.

Experience & Education: Minimum of 10 years experience working in public health, quality improvement, strategic information, education and/or international development; minimum of five years experience in managing development programs in health or other fields. Minimum of five years experience in public health, quality improvement, or strategic information programs with strong leadership skills and experience in managing large teams across multiple partner organizations, as well as working in politically sensitive contexts. The Chief of Party must demonstrate skills in problem solving, consensus building and coordination of diverse interests and institutions. Master's degree in public health, epidemiology, infectious diseases, internist medicine, hospital management, development, or a related field required. Must be professionally proficient and fluent in written and spoken Spanish and English.

Summary Budget Information (1 page, not counting against the page limit)

The summary budget information must indicate the requested USAID funding amount, inclusive of all program costs broken out by major budget category for planned activities implemented by the applicant and any potential sub-applicants for the entire period of the program. Basic cost and budget assumptions applied must be provided in support of the summary budget. The Summary Budget Information must follow the format / template below.

E. Summary Budget Information

Line Item	Total amount (USD)	Cost / Budget Assumption Applied
Personnel		Example: "The total amount accounts for salaries of X number of long term (expatriate/local/third country) personnel and contracted labor."
Travel and Transportation		Example: "The amount covers the cost of X number of in-country travel and X number of international travel for programmatic purposes. Etc…"
Equipment & Supplies		Example: "The amount covers the cost of office equipment for X number of staff in X number of field offices (eg., X laptops, X copy machine, etc.)
Other Direct Cost		Example: "The amount covers the costs of rental of venues for facilitating training/workshops and office space."
Indirect Cost		Example: "The amount is based on the organization's NICRA dated xx-yy-zzz" or "The amount is based on a de minimis rate of 15%".
Total Cost		

3. Phase 2- Co-creation and Full technical and cost application submission

The Apparently Successful Applicant and USAID will discuss specific plans and formats for co-creation/co-development and an associated timeline for developing the final Program Description.

The applicant's proposed Chief of Party from the concept application phase should participate in and support the co-creation phase, if available.

[END OF SECTION D]

SECTION E: SUBMISSION REQUIREMENTS AND DEADLINES

1. Questions and Answers

Applicants must submit questions regarding this NOFO, if any, to burmaoaa@usaid.gov, with copy to Mr. Bruce Gelband at bgelband@usaid.gov and Mr. Aung Min Thaw at athaw@usaid.gov, no later than the date and time indicated on the NOFO cover letter, as amended. Any information given to a prospective applicant concerning this NOFO will be furnished promptly to all other prospective applicants as an amendment to this NOFO, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicant.

2. Submission Requirements

Applications in response to this NOFO must be submitted **no later than the closing date and time indicated on the cover letter**, as amended. A late application will not be reviewed nor considered. The applicant must retain proof of timely delivery in the form of a confirmation email from Burma OAA. Applicants must retain proof of timely delivery in the form of confirmation from the receiving office/certified mail receipt. Additionally, applicants should retain a copy of the application and all enclosures for their records.

Electronic Submission:

The application must be submitted by email to burmaoaa@usaid.gov with a copy to athaw@usaid.gov. The application must include the NOFO number and the applicant's name in the subject line heading. In addition, for an application sent by multiple emails, the subject line must also indicate whether the sequence of the emails and their attachments (e.g. "No. 1 of 4", etc.). For example, if your cost application is being sent in two emails, the first email should have a subject line that states: "[NOFO number], [organization name], Technical Application, Part 1 of 2". USAID will not be responsible for errors in compiling electronic applications if no instructions are provided or are unclear.

After submitting an application electronically, the applicant should immediately check their own email to confirm that the attachments were indeed sent. If an applicant discovers an error in transmission, please send the material again and note in the subject line of the email or indicate in the file name that it is a "corrected" submission. Do not send the same email more than once unless there has been a change, and if so, please note that it is a "corrected" email.

There may be a problem with the receipt of *.zip files due to anti-virus software. Therefore, the applicant is discouraged from sending files in this format as USAID/Burma cannot guarantee their acceptance by the internet server. File size must not exceed 25 MB.

3. Unique Entity Identifier (UEI) and SAM.gov Registration

Each applicant, that does not have an exemption under 2 CFR 25.110, is required to:

(1) Be registered in SAM.gov before submitting an application.
(2) Maintain a current and active registration in SAM.gov at all times during which it has an active Federal award as a recipient or an application under consideration by USAID. The applicant or recipient must review and update its information in SAM.gov annually from the date of initial registration or subsequent updates to ensure it is current, accurate, and complete. If applicable, this includes identifying the applicant's or recipient's immediate and highest-level owner and subsidiaries, as well as providing information on all predecessors that have received a Federal award or contract within the last three years; and
(3) Include its UEI in each application it submits to USAID. A UEI is a unique, alpha-numeric 12-character identifier issued and maintained by SAM.gov that verifies the existence of an entity globally. The UEI is the official government-wide identifier used for Federal awards.

The SAM registration process may take many weeks to complete. Therefore, applicants are encouraged to begin the process early. If an applicant is unable to obtain a UEI and complete SAM registration before submitting an application, the applicant may request an exemption in accordance with the instructions below. If an applicant has not fully complied with the requirements above by the time USAID is ready to make an award, USAID may determine that the applicant is not qualified to receive an award and use that determination as a basis for making an award to another applicant. Applicants can find additional resources for obtaining a UEI and registering in SAM on a blog post on WorkwithUSAID.gov.

[END OF SECTION E]

SECTION F: APPLICATION REVIEW INFORMATION

1. Responsiveness Review

Applicants must review, understand, and comply with all aspects of this NOFO. Failure to comply with the NOFO may be considered as being non-responsive and may be evaluated accordingly.

The merit review criteria prescribed here are tailored to the requirements of this particular NOFO. Applicants should note that these criteria serve to: (a) identify the significant matters which the applicants should address in their applications, and (b) set the standard against which all applications will be evaluated.

Technical and other factors will be evaluated relative to each other, as described here and prescribed by the Technical Application Format. The Technical Application will be scored by a Selection Committee (SC) using the criteria described in this section.

The final selection of concept paper(s) to be evaluated will be determined by the Agreement Officer. A concept paper not meeting a minimum level of acceptability will not be evaluated and USAID will not provide specific feedback on concept papers that are not evaluated.

2. Phase I- Concept Application Merit Review Criteria

Concept applications will be reviewed and evaluated in accordance with the following criteria which are shown in order of decreasing importance:

Criterion	Criterion Name
Criterion 1	Technical Approach
Criterion 2	Institutional Experience and Past Success
Criterion 3	Management Plan

Technical Approach: The extent to which the application demonstrates a current understanding of and proposes an effective and viable approach to addressing the challenges faced by potential program beneficiaries and means to successfully achieve the activity's Objectives.

Institutional Experience and Past Success: The extent to which the application convincingly demonstrates the Applicant's and Major Subrecipient's***, if any, institutional experience

and past success, and the degree to which the Applicant will leverage this experience to enhance the likelihood of successfully carrying out this activity.

***For the purpose of this section, the term “major subrecipient" includes only those subrecipients(s) budgeted in excess of $1,500,000 in the summary budget over the entirety of the performance period.

Management and Staffing Plan: The extent to which the Applicant demonstrates a convincing management plan, including the Chief of Party, that supports timely start up and implementation in the current operating context and will effectively organize, mobilize, and manage resources to implement the proposed interventions to achieve the objectives and anticipated results.

Summary Budget
The summary budget will be evaluated to assess and understand the scope of the applicant’s proposed technical approach in terms of cost.

3. Phase 2- Co-creation and Full technical and cost application submission

The Apparently Successful Applicant will be invited to the co-creation and collaboration process to identify and develop the activities that will help achieve the results desired under this NOFO; identify and incorporate additional partners; and determine respective roles and responsibilities related to the implementation of those activities. The co-creation process builds on a Concept Paper that has strength and potential; it is not intended to modify Applicants initiative or build new concepts from the ground up. USAID envisages a product of the co-creation process is a strong draft project description for the full application phase, as well as quantitative and/or qualitative indicators or performance milestones. If an Applicant does not succeed at the co-creation phase, the process ends for that Applicant.
Following completion of the co-creation activities, the Apparently Successful Applicant must submit a full technical and cost application accounting for conclusions of the co-creation. Details on the submission of the full technical and cost application will be provided following the co-creation.

Technical Application:
At this stage, the USAID will evaluate the Final Technical Application of the Apparently Successful Applicant as “Acceptable” or “Unacceptable.” In the event that negotiations fail to improve the Apparently Successful Applicant’s Final Technical Application/Program Description, the Agreement Officer (AO) may determine the application as “unacceptable.”

Cost Application Review:
The Agency will evaluate the cost application of the applicant(s) under consideration for an award to determine whether the costs are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E.

The Agency will also consider (1) the extent of the applicant's understanding of the financial aspects of the program and the applicant's ability to perform the activities within the amount requested; (2) whether the applicant's plans will achieve the program objectives with reasonable economy and efficiency; and (3) whether any special conditions relating to costs should be included in the award.

Proposed cost share, if provided, will be reviewed for compliance with the standards set forth in 2 CFR 200.306, 2 CFR 700.10.

The Agreement Officer's designee will perform a risk assessment (2 CFR 200.206) of the apparently successful applicant. The Agreement Officer may determine that a pre-award survey is required to inform the risk assessment in determining whether the applicant has the necessary organizational, experience, accounting and operational controls, financial resources, and technical skills – or ability to obtain them – in order to achieve the objectives of the program and comply with the terms and conditions of the award. Depending on the result of the risk assessment, the AO will decide to execute the award, not execute the award, or award with "specific conditions" (2 CFR 200.208).

[END OF SECTION F]

SECTION G: AWARD NOTICES

Award of the agreement contemplated by this NOFO cannot be made until funds have been appropriated, allocated and committed through internal USAID procedures. While USAID anticipates that these procedures will be successfully completed, applicants are hereby notified of these requirements and conditions for the award. Notice of Federal award signed by the Agreement Officer is the official document that obligates funds and will be provided to the authorized official of the selected applicant by electronic means as identified in the application. The Agreement Officer is the only individual who may legally commit the U.S. Government to the expenditure of public funds.

Unsuccessful applicants will be notified by electronic means within 90 days of the Agreement Officer's selection.

Pre-award costs are only allowed when specifically included in the award terms, or otherwise approved in writing by the Agreement Officer. Without such written authorization, any costs incurred for application development or program performance prior to an award period of performance start date are at the applicant's own risk; do not assume that the AO will approve them as pre-award costs in the award.

[END OF SECTION G]

SECTION H: POST-AWARD REQUIREMENTS AND ADMINISTRATION

1. Administrative & National Policy Requirements

The resulting award from this NOFO will be administered in accordance with the following:

For Non-U.S. organizations: 2 CFR 200 Subpart E, ADS 303 and Standard Provisions for Non-U.S. Non-governmental Organizations.

See Annex 1, for a list of the Standard Provisions that will be applicable to awards resulting from this NOFO.

2. Nature of the Relationship between USAID and the Recipient

The principal purpose of the relationship between USAID and the recipient is to transfer funds to accomplish a public purpose of support or stimulation of the program, as authorized by Federal statute. The successful recipient will be responsible for ensuring the achievement of the program objectives and the efficient and effective administration of the award through the application of sound management practices. The recipient will assume responsibility for administering Federal funds in a manner consistent with underlying agreements, program objectives, and the terms and conditions of the Federal award.

3. Reporting Requirements

All reports listed below must be incorporated into the milestone plan and will be submitted electronically to the AOR and the AO. The Recipient must consult the AOR on the format and expected content of reports prior to submission.

- Annual Implementation Plan
- MEL Plan
- Gender Action Plan
- Quarterly Performance Reports
- Annual Reports
- Final Report

a. Annual Implementation Plan

An annual implementation plan for the first year of the program will be submitted within 60 days of award, developed in consultation with USAID and relevant stakeholders. In subsequent years, an annual work plan will be submitted at least 30 days prior to the beginning of the next U.S. fiscal year (i.e. by September 1). The format should be agreed

upon between the recipient and the AOR, but generally must incorporate scope, proposed M&E indicators and targets, budget, schedule, approvals, relationships, control over program resources, and resource allocation. The plan should be sufficiently detailed to allow USAID and its representatives to monitor implementation. It will also provide a communications tool to describe the overall program in terms of activities and expected results, roles of different partners, and the relationships with key counterparts. The work plan should be maintained with current information and procedures and be reviewed at regularly scheduled program meetings between the recipient and USAID. As this is a milestone-based award, the applicant/awardee must align specific interventions in the work plan to milestones. The work plan should be an expanded version of the award milestones. There must be a logical connection between the work plan and specific milestones.

The Annual Work Plans should generally include:

- Technical approach and strategy for the coming year and expected results to be achieved, relative to the overall Life of Project design and expected results
- Proposed interventions and deliverables for this year, including and a timeline for implementation and information on how activities will be implemented;
- Defined performance measures and targets tied to the M&E plan;
- The anticipated risks with regards to achieving the anticipated objectives of the Agreement and how they will be mitigated;
- Personnel requirements to achieve expected outcomes;
- Details of collaboration with other partners; and
- Budget and expected availability of funds.

b. Monitoring, Evaluation and Learning (MEL) Plan

A detailed MEL Plan will be submitted within 90 days of award. The MEL Plan will cover the entire period of the Agreement and will be revised as needed. The plan must include, but not necessarily be limited to, the following: (1) the results to be achieved by the program; (2) the indicators to be used to measure achievement of key outputs, results and outcomes; (3) detailed indicator definitions and Performance Indicator Reference Sheets, including a description of the method of data collection to be used to obtain the indicator data, and periodicity of reporting; (4) baseline (as available) and targets for each indicator by year; and (5) a learning agenda outlining the approach and key activities to be undertaken to inform project learning, scale-up of successful approaches, and adaptive management.

Indicators will be developed in coordination with USAID, relevant stakeholders, and any sub awardees or subrecipients, as applicable, to measure the progress of all components of the results framework as well as key project outputs. These indicators will be a combination of output, result, and outcome indicators, and selected indicators will be reported on a quarterly basis. The AOR will provide guidance on any required USAID standard indicators

other than those identified in the Program Description, if applicable.

c. Gender Action Plan

The Recipient shall develop and submit Gender Action Plan within 90 days of the award.

d. Quarterly Performance Reports

The Recipient shall submit one quarterly program performance report to the AOR. Quarterly narrative reports should generally not exceed 15 pages, excluding Annexes, and must be submitted within 30 days of the end of each U.S. Government fiscal quarter. The Recipient shall submit annual reports in lieu of the 4th quarterly report each year, and highlight the information relevant to the 25 fourth quarter, not later than 30 days after the end of each program year. USAID reserves the right to request restrictions on public dissemination of sensitive information or analyses in the required reports. Recipients will consult the AOR on the format and expected content of reports prior to submission.

The quarterly reports shall include the following sections:

- Progress achieved toward implementation, and achievement of expected results, IRs and key deliverables, supported by indicator data and other data sources as relevant;
- Summary status of timelines planned in the approved annual work plan and priorities for the next reporting period;
- Deliverables completed to date;
- Management and staffing changes, and any sub-partner changes;
- Problems encountered, if any, including explanation for any established goals not met, and how challenges were addressed or will be overcome in the subsequent reporting period; and
- Annexes to include:
- Expenditure summary showing cumulative disbursements and estimated accruals (undisbursed accruals), and a comparison against budget estimates with explanation for any significant deviations
- Environmental compliance, if applicable.

The quarterly performance report may contain sensitive information that analyzes and/or describes, inter alia, financial or proprietary information. The quarterly reports are public documents and as such, the Recipient will include all sensitive information in an Annex to the quarterly reports.

e. Annual Reports

The Recipient shall submit Annual Reports (an electronic copy) to the USAID AOR in lieu of the fourth quarterly report for each project year. However, this annual report must include a separate progress report for the fourth quarter. The annual results report should cover the period of October 1 through September 30, or any part thereof in which the project was active and must be submitted within 30 days of the end of the fiscal year. Results reports must summarize overall achievements and results, drawing on quantitative as well as qualitative data in accordance with the MEL plan, and discuss changes in key results indicators from baseline assessments. Annual performance reports should reflect annual and cumulative project data and address elements required for quarterly reports outlined above.

Annual summary reports should also include details on the costs and resources utilized to achieve key results or implement particular models or approaches supporting under the program. The format and depth of analysis should be agreed on in consultation with the AOR.

f. Final Report

The Recipient shall submit an electronic copy to the AOR. The final report shall be submitted no later than 90 calendar days after the expiration or termination of the award. The final report shall also consolidate activities and analyses of all partners into one document and their activities and progress towards results. The Final Report, in addition the elements described above, shall contain the following information:

- An analysis of progress and results that synthesizes achievements of all organizations that contributed towards program objectives. This section should clearly describe activities, major accomplishments, and results achieved, including results for all of the activities under the Award;
- Final data, compared to baseline data, for all indicators included in the performance monitoring, evaluation and learning plan award activities. This section should include disaggregated data by gender, geographic location, age, historically disenfranchised groups, and other relevant groups identified;
- A summary of problems/obstacles encountered during the implementation, and how those obstacles were addressed and overcome, if appropriate;
- Reasons why established goals were not met, if applicable;
- The Recipient's Final Report may contain sensitive information that analyzes and/or describes, inter alia, internal financial or proprietary information of the recipient. The final report is a public document and as such, the Recipient will include all sensitive information in an Annex to the final report. The Annex to the report will be submitted to the AOR and the Agreement Officer but it will not be made available to the public on the

Development Experience Clearinghouse.

4. Environmental Compliance

(The apparent inconsistency in numbers listed under this section is intentional because only those that are applicable to this award have been selected.)

1a) The Foreign Assistance Act of 1961, as amended, Section 117 requires that the impact of USAID's activities on the environment be considered and that USAID include environmental sustainability as a central consideration in designing and carrying out its development programs. This mandate is codified in Federal Regulations (22 CFR 216) and in USAID's Automated Directives System (ADS) Section 201.3.4.5 and Chapter 204, which, in part, require that the potential environmental impacts of USAID-financed activities are identified prior to a final decision to proceed and that appropriate environmental safeguards are adopted for all activities. Recipient environmental compliance obligations under these regulations and procedures are specified in the following paragraphs of this award.

1b) In addition, the recipient must comply with host country environmental regulations unless otherwise directed in writing by USAID. In case of conflict between host country and USAID regulations, the latter shall govern.

1c) No activity funded under this Cooperative Agreement may be implemented unless an environmental threshold determination, as defined by 22 CFR 216, has been reached for that activity, as documented in a Request for Categorical Exclusion (RCE), Initial Environmental Examination (IEE), or Environmental Assessment (EA) duly signed by the Bureau Environmental Officer (BEO). (Hereinafter, such documents are described as "approved Regulation 216 environmental documentation.")

4a) As part of its initial Work Plan, and all Annual Work Plans thereafter, the Recipient, in collaboration with the USAID Agreement Officer's Representative (AOR) must review all ongoing and planned activities under Fixed Amount Award to determine if they are within the scope of the approved Regulation 216 environmental documentation.

4b) If the Recipient plans any new activities outside the scope of the approved Regulation 216 environmental documentation, it must prepare an amendment to the documentation for USAID review and approval. No such new activities may be undertaken prior to receiving written USAID approval of environmental documentation amendments.

4c) Any ongoing activities found by USAID to be outside the scope of the approved Regulation 216 environmental documentation must be halted by the Recipient until an amendment to the documentation is submitted and written approval is received from

USAID.

5 When the approved Regulation 216 documentation is (1) an IEE that contains one or more Negative Determinations with conditions and/or (2) an EA, the Recipient must:

5a) Unless the approved Regulation 216 documentation contains a complete environmental mitigation and monitoring plan (EMMP) or a project mitigation and monitoring (M&M) plan, prepare an EMMP or M&M Plan describing how the Recipient will, in specific terms, implement all IEE and/or EA conditions that apply to proposed project activities within the scope of the award;

5b) Integrate a completed EMMP or M&M Plan into the initial work plan; and

5c) Integrate an EMMP or M&M Plan into subsequent Annual Work Plans, making any necessary adjustments to activity implementation in order to minimize adverse impacts to the environment.

The EMMP or M&M Plan must include monitoring the implementation of the conditions and their effectiveness.

5. SANCTIONS IN BURMA AND PRIOR APPROVAL REQUIREMENT (OCTOBER 2023)

a. WORKING IN BURMA – U.S. GOVERNMENT POLICY

Work under this award must be consistent with U.S. Government (USG) policy toward Burma as in effect from time to time and as notified by the Agreement Officer (AO) or the Agreement Officer's Representative (AOR).

b. OFAC SANCTIONS PROGRAM

Recipients must comply with U.S. sanctions with respect to Burma enforced by the U.S. Department of Treasury's Office of Foreign Assets Control (OFAC). OFAC has issued a general license (General License 1 and codified at 31 CFR 525.509) authorizing all transactions and activities otherwise prohibited by Executive Order (EO) 14014 if they are for the conduct of the official business of the United States Government by employees, grantees, or contractors thereof. Transactions with individuals or entities sanctioned under other OFAC sanctions programs remain prohibited, absent applicable licenses authorized under those sanctions programs. However, even with these authorizations, as a matter of policy implementing partners still need to check both the OFAC SDN and non-SDN lists to ensure USAID funded

activities do not enter into transactions with or provide benefits to individuals or entities on such lists.

c. See also Standard Provision for U.S. Non-Governmental Organization M12. PREVENTING TRANSACTIONS WITH, OR THE PROVISION OF RESOURCES OR SUPPORT TO, SANCTIONED GROUPS AND INDIVIDUALS (MAY 2020)/Standard Provision for Non-U.S. Non-Governmental Organizations M14. PREVENTING TRANSACTIONS WITH, OR THE PROVISION OF RESOURCES OR SUPPORT TO, SANCTIONED GROUPS AND INDIVIDUALS (MAY 2020).GROSS VIOLATIONS OF HUMAN RIGHTS:

Funding or support provided under this award must not be made available to any individual or organization credibly alleged to have committed gross violations of human rights. When considering subawards or providing funding or support to any individual or organization, the Recipient must conduct a due diligence review of publicly available sources. Following this due diligence review, if the Recipient finds derogatory information on the individual or organization, such information, along with a complete list of the names of all individuals and organizations receiving funding or support must be submitted to USAID/Burma.

The Recipient must provide materials to USAID/Burma by submitting its findings to both 1) the Agreement Officer, 2) the Agreement Officer's Representative and 3) the Burma Consultation Mailbox at burmareporting@usaid.gov. The Agreement Officer will communicate a final determination of whether the Recipient is permitted to proceed with the subaward or provide funding or support to the individual or organization under review.

d. PRIOR APPROVAL FOR CERTAIN FUNDING OR SUPPORT:

The Recipient must not provide funding or support under this award to the State Administration Council or any organization or entity controlled by, or an affiliate of, the armed forces of Burma.

Without prior written approval from the Agreement Officer, the Recipient must not provide funding or support under this contract to:

- any other ministry, institution, organization, or part of the Government of Burma, including the police or paramilitary groups;
- the People’s Defense Forces; or
- the armed wings or branches of Ethnic Armed Organizations.

When considering funding or support to these individuals or organizations, the Recipient must submit an approval request to 1) the Agreement Officer, 2) the Agreement Officer's Representative and 3) the Burma Consultation Mailbox at burmareporting@usaid.gov.

e. This special assistance requirement must be included in all subawards and contracts.

6. DIGITAL SECURITY (SEPTEMBER 2022)

The Recipient must implement measures to protect activity-related PII and other sensitive information and maintain organizational and staff cybersecurity, including training and provision of secure software and hardware. These measures must adapt to specific programmatic needs and the operating environment context.

If subawards are included as part of implementation, the Recipient must include measures to ensure sub-awardees maintain or will achieve the appropriate level of digital security for the protection of sensitive activity information, as determined by evaluating risk levels, target vulnerability, and organizational capacity, in coordination with USAID as needed.

Minimal standards of digital security to consider include the maintenance of anti-virus software, use of encrypted passwords and communications, enterprise accounts/security-as-a-service, custom network services, mobile device cleaning, locking and other access protections, and as-needed cyber security training. Specific digital security standards should be discussed and agreed upon among partners and with input from USAID, and reflected in annual work plans. Additional, detailed guidance and supplementary support documents and tools will be made available to the Recipient by USAID.

[END OF SECTION H]

ANNEX 1 - STANDARD PROVISIONS

The selected applicant will be required to comply with USAID's standard provisions. The standard provisions included in the resultant award will be dependent on the organization that is selected or, in the case of a fixed amount award, the type of award.

The full text of these provisions may be found on USAID's website here:

- Standard Provisions for non-U.S. Nongovernmental Organizations: https://www.usaid.gov/ads/policy/300/303mab, and

The resultant award will include the full text of current Mandatory Standard Provisions and the Required As Applicable Standard Provisions. **The required as applicable standard provisions will be determined at award.**

Required as Applicable Standard Provisions for Non-U.S. Nongovernmental Organizations

REQUIRED AS APPLICABLE STANDARD PROVISIONS Non-U.S. NGOs
RAA1. Advance Payment and Refunds (August 2024)
RAA2. Reimbursement Payment and Refunds (August 2024)
RAA3. Indirect Costs – Negotiated Indirect Cost Rates Provisional & Final (August 2024)
RAA4. Indirect Costs – Charged As A Fixed Amount (Nonprofit) (August 2024)
RAA5. Indirect Costs – De Minimis Rate (August 2024)
RAA6. Reserved
RAA7. Reporting Subawards and Executive Compensation (August 2024)
RAA8. Subawards (August 2024)
RAA9. Travel and International Air Transportation (December 2014)
RAA10. Ocean Shipment of Goods (June 2012)
RAA11. Reporting Host Government Taxes (December 2022)
RAA12. Patent Rights (December 2022)
RAA13. Reserved
RAA14. Investment Promotion (December 2022)
RAA15. Cost Sharing (August 2024)
RAA16. Program Income (August 2024)
RAA17. Foreign Government Delegations to International Conferences (June 2012)

REQUIRED AS APPLICABLE STANDARD PROVISIONS Non-U.S. NGOs
RAA18. Standards for Accessibility for the Disabled In USAID Assistance Awards Involving Construction (September 2004)
RAA19. Protection of Human Research Subjects (June 2012)
RAA20. Statement for Implementers of Anti-Trafficking Activities on Lack of Support for Prostitution (June 2012)
RAA21. Eligibility of Subrecipients of Anti-Trafficking Funds (June 2012)
RAA22. Prohibition on the Use of Anti-Trafficking Funds to Promote, Support, or Advocate for the Legalization or Practice of Prostitution (June 2012)
RAA23. Voluntary Population Planning Activities – Supplemental Requirements (January 2009)
RAA24. Conscience Clause Implementation (Assistance) (February 2012)
RAA25. Condoms (Assistance) (September 2014)
RAA26. Prohibition on the Promotion or Advocacy of the Legalization or Practice of Prostitution or Sex Trafficking (Assistance) (September 2014)
RAA27. Limitation on Subawards to Non-Local Entities (July 2014)
RAA28. Contract Provision for DBA Insurance Under Recipient Procurements (December 2022)
RAA29. Reserved
RAA30. Reserved
RAA31. Never Contract with the Enemy (August 2024)

[END OF ANNEX 1]

[END OF RFA]